

West Virginia State Treasurer

Report of Unclaimed Property

Form UP 8-8

Holder Name	FEIN Number
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Item No.	Property Type Code	Property Description			
Owner Last Name		First Name	Middle Initial	Title	Designate ownership: ____And ____Or ____ Other
Last Known Address		City	State	Zip	If Other, specify below: _____
Date of Last Activity	Date of Birth	Owner Social Security Number	Interest Rate	Dormancy Charge	Amount Remitted to Treasury \$

Complete additional Owner boxes (below) if there is more than one Owner for this property.

Additional Owner Last Name	First Name	Middle Initial	Additional Owner Social Security Number
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AGENCY USE ONLY

FIMS# _____ Deposit Date _____

Date Accounts Entered _____ By Whom _____

PAGE: _____ **OF:** _____

PAGE TOTAL \$

IF LAST PAGE, ENTER GRAND TOTAL REMITTED \$